

F
A
X

T
R
A
N
S
M
I
T
T
A
L

Reveo, Inc.
Phone 914.345.9555 Fax 914.345.9558
3 Westchester Plaza, Elmsford, NY 10523
www.reveo.com

Reveo

RECEIVED
CENTRAL FAX CENTER
FEB 04 2005

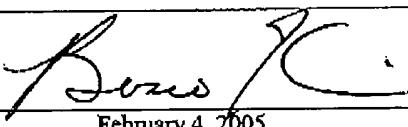
TO: USPTO FROM: Bosco Kim
FAX #: 703 872-9306 Reveo, Inc.
DATE: February 4, 2005 FAX #: 914-345-9558
 # OF PAGES: 14 (including this
 cover)

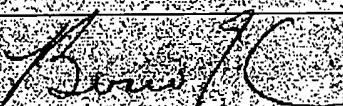
RE: US Patent Application Serial No. 10/045,871 (VREX-
0007USAAON00)

MESSAGE:

TRANSMITTAL FORM		Application No.	10/045,871
		Filing Date	January 14, 2002
		First Named Inventor	Sadeq M. Faris
		Art Unit	2871
		Examiner	Thoi V. Duong
Total Number of Pages in This Submission: 13		Attorney Docket Number	VREX-0007USAAON00

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment <input type="checkbox"/> Request <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Statement <input type="checkbox"/> Certified Copy of Priority <input type="checkbox"/> Document(s) <input type="checkbox"/> Response to Missing <input type="checkbox"/> Parts/Incomplete Application Response to Missing <input type="checkbox"/> Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Notice of Non- Compliant Amendment <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Request for Continued Examination	<input type="checkbox"/> Drawing(s) - <input type="checkbox"/> Licensing-related <input type="checkbox"/> Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
REMARKS		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Bosco B. Kim
Signature	
Date	February 4, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Type of Printed Name	Bosco B. Kim		
Signature		Date	February 4, 2005

Feb. 4. 2005. 4:51PM

No. 2641 P. 4/14

VREX-0007USAAON00

RECEIVED
CENTRAL FAX CENTER

FEB 04 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Faris, et al.

)
Group Art Unit

SERIAL NO.: 10/045,871

) 2871

FILING DATE: January 14, 2002

) Examiner

FOR: Twisted Nematic Micropolarizer and its
Method of Manufacturing

) Duong, Thoi V.

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION

Sir/Madam:

This Amendment is submitted in response to the Office Action mailed October 28, 2004. Please amend the present Application as follows: